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APPLICATION NO.	FILING DATE	FIRST NAMED INVE		INVENTO	)R	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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TITLE OF INVENTION: O	PTICAL MICROSWITCH						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBI	LICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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. ASSIGNEE NAME AND	RESIDENCE DATA TO BE	PRINTED ON TH	HE PATENT	(print or t	type)		
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified belon 37 CFR 3.11. Completion of	w, no assignee dathis form is NOT	ata will appea a substitute fo	ar on the or filing a	patent. If an assign n assignment.	ee is identified below, the o	document has been filed
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IOLON, INC. SAN JOSE, CALIFORNIA							
lease check the appropriate	assignee category or categorie	s (will not be prin	nted on the pat	tent);	□ individual □ c	orporation or other private g	roup entity 🚨 governm
a. The following fee(s) are enclosed:  4b. Payment of Fee(s):							
Issue Fee A check in the amount of the fee(s) is enclosed.  Publication Fee (No small entity discount permitted)  Payment by credit card. Form PTO-2038 is attached.							
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